The Hampden Hippocrat

MAY, 1973

HAMPDEN DISTRICT MEDICAL SOCIETY

1414 STATE STREET
SPRINGFIELD, MASS. 01109

Telephone: 736-0661

VIVIAN M. PURDY, *Executive Secretary*

OFFICERS

ROBERT N. LAMARCHE, M.D. — *President*
SETRAG A. ZACARIAN, M.D. — *Vice President and President Elect*
WALTON E. STEVENS, M.D. — *Secretary*
CARL W. JANOVSKY, M.D. — *Assistant Secretary*
PAUL T. MOORE, M.D. — *Treasurer*

EXECUTIVE AND GRIEVANCE COMMITTEES

ROBERT N. LAMARCHE, M.D.	*Ex-officio*	JOHN J. BANDEIAN, M.D.
SETRAG A. ZACARIAN, M.D.	*Ex-officio*	PAUL T. MOORE, M.D.
WALTON E. STEVENS, M.D.	*Ex-officio*	AUGUSTO G. ASINAS, M.D.
ALVIN J. KEROACK, M.D.	1973	JOHN E. MCHUGH, M.D.
JOHN J. BURKE, M.D.	1974	WILLIAM E. SHEEHAN, M.D.
SHELDON S. GOLDBERG, M.D.	1975	WILLIAM J. CUMMINGS, M.D.

CHAIRMEN OF COMMITTEES

HOWARD N. SIMPSON, M.D. — *Auditing*
JOSEPH R. KELLY, M.D. — *Blue Shield District Professional Service*
HARRY N. MEMERY, M.D. — *By-laws*
MALCOLN S. ALLAN, M.D. — *Censors*
ALFONSO A. PALERMO, M.D. — *Commissioner of Trials*
FREDERICK C. SCHWENDENMANN, M.D. — *Disaster Medical Care*
ROBERT D. O'MALLEY, M.D. — *Insurance, Labor Relations, and Industrial Accidents*
JAMES D. ALLAN, M.D. — *Legislative*
EUGENE W. BEAUCHAMP, JR., M.D. — *Malpractice and Medico-Legal Affairs*
THEODORE E. HOFFMAN, M.D. — *Medico-Religious*
H. BERNARD TILLMAN, M.D. — *Members' Insurance Programs*
STANLEY D. RAPINCHUK, M.D. — *Mental Health*
DAVID E. BOOKER, M.D. — *Nominating*
FRANK G. MILLS, M.D. — *Nursing Homes*
BRUCE B. STOLER, M.D. — *Peer Review*
JAMES G. FITZPATRICK, M.D. — *Public Health*
AUGUSTO G. ASINAS, M.D. — *Public Relations*
ROBERT N. LAMARCHE, M.D. AND SETRAG A. ZACARIAN, M.D. — *Representatives to Community Council*
BERNARD BLOOM, M.D. — *Scholarship*
BRUCE B. STOLER, M.D. — *Tax Supported Medical Care*
CARLO Q. MONTORI, M.D. — *Woman's Auxiliary*

COUNCILORS TO THE MMS

JOHN C. AYRES, M.D. — *Executive Councilor*
JAMES D. ALLAN, M.D. — *Alternate to the Executive Councilor*

MALCOLM S. ALLEN, M.D.
AUGUSTO G. ASINAS, M.D.
EUGENE W. BEAUCHAMP, JR., M.D.
MAURICE J. BOIVIN, M.D.
GARDNER COX, II, M.D.
LOUIS F. DEROSE, M.D.
ELMER F. FRANSEEN, M.D.
JOHN F. GRIFFIN, M.D.
DONALD R. HAYES, M.D.
GARRY DEN. HOUGH, III, M.D.
JOSEPH R. KELLY, M.D.
FRANK G. MILLS, M.D.
PAUL T. MOORE, M.D.
LEO S. NEWMAN, M.D.
FREDERICK C. SCHWENDENMANN, M.D.
LORNE C. SMITH, M.D.
BRUCE B. STOLER, M.D.
EMANUEL WIEDMAN, M.D.
SETRAG A. ZACARIAN, M.D.
ALLEN S. JOHNSON, M.D.
ROBERT N. LAMARCHE, M.D.
WALTON E. STEVENS, M.D.

THE HAMPDEN HIPPOCRAT
·1942·

VOL. XXIX, NO. 5 MAY 1973

A bulletin for
The Hampden District of
The Massachusetts
Medical Society

Founded in 1942 by Edward P. Bagg, Jr., M.D. and William A. R. Chapin, M.D.

BOARD OF EDITORS

MAX MILLMAN, M.D.
Editor-Emeritus

JOHN C. AYRES, M.D.
Editor-in-Chief

H. BERNARD TILLMAN, M.D.
Assistant Editor

ASSOCIATE EDITORS

ROBERT M. ABRAMS, M.D.
JAMES D. ALLAN, M.D.
OLIVE A. COOPER, M.D.
WALTER S. MOZDEN, M.D.
WALTON E. STEVENS, M.D.
SETRAG A. ZACARIAN, M.D.
JOHN J. ZADWORNY, M.D.

JOSEPH B. GREENSPAN, M.D.
Secretary and Business Mgr.

MRS. ARTHUR WILLARD
Advertising Director

CONTENTS

PRESIDENT'S PAGE
INAUGURAL ADDRESS – THE CHALLENGE . . . 4

HDMS ANNUAL MEETING HIGHLIGHTS 6

HDMS OFFICERS, 1973 – 1974 10

HDMS COMMITTEE CHAIRMEN, 1973 – 1974 . . . 11

HDMS EXECUTIVE COMMITTEE 12

THE TEENAGE DILEMMA – V.D. 15

PHYSICIANS – AN ENDANGERED SPECIES 16

PROPOSED REVISION OF MMS BYLAWS 17

CANCER CARE – A MULTIMODAL APPROACH . . 22

DISCRIMINATORY TREATMENT 25

THE HAMPDEN HIPPOCRAT is published monthly except for July and August.

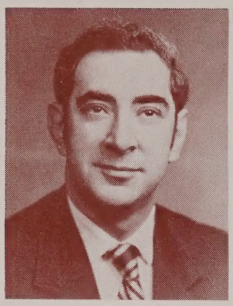
The opinions expressed in this bulletin are those of the writers and do not reflect the official viewpoint of the Hampden District Medical Society unless so stated.

Communications pertaining to editorial content should be addressed to the Editor-in-Chief, 1414 State Street, Springfield, Mass. 01109.

Business communications should be addressed to the Business Manager, 91 School Street, Springfield, Mass. 01105.

Communications pertaining to advertising should be addressed to Mrs. Arthur Willard, 62 Irvington Street, Springfield, Mass. 01108; telephone: 733-5336.

To be assured of uninterrupted delivery of **The Hampden Hippocrat**, notify us in advance of an address change and include your ZIP CODE number.



President's Page

Inaugural Address . . .

THE CHALLENGE

I am the 133rd President of the Hampden District Medical Society. In 1840, there were 14 members of the Society and at present there are over 530. Much has happened to Medicine since then. Today, more than ever, as physicians, we are being threatened, tested and tried by the torrential avalanche of consumerism, federalism, "insurism" and "hospitalism". We constitute a little over one tenth of one per cent of the American population and recipient of approximately 17 per cent of the health dollar. Yet, we have been positioned into a defensive role as being responsible for most of the ills of this nation's health program and a diabolical role for causing the spiraling cost of medical care. Seldom does the press grant us accolades for work well done, the advancement of medicine, increasing the longevity of life, and eradicating the devastating diseases from the bubonic plague to the crippling malformations of poliomyelitis. Criticisms are not all bad; very often, they serve as a source of feedback, for there is no system or group that is so perfect that it cannot be improved upon.

Today, more than ever we face insurmountable challenges. As physicians, this is not new to us, for we face them daily in the practice of our noble art. How best can we cope with these challenges and rise above them, is indeed the question which confronts us all. It is not as late as some of you may surmise. The solution to some of the vexing problems are two-fold: *work collectively* and exercise *self-evaluation.*

Before the Congress of the U.S. there are no less than five health plans under consideration, including the AMA proposals. According to HEW Secretary, Casper Weinberger, the earliest hearings of any of the National Health Insurance programs will not be held before the fiscal year of 1975. The Bennett Ammendment, Public Law 92-603, which passed Congress October of 1972, was the most important piece of health legislation of the decade. It permeates into the very heart and the central core of the practice of medicine as we recognize it today. At the present time, 38 per cent of the American population are on Medicare and Medicaid, which immediately embrace the pre-requisites of the Bennett Ammendment. This law enforces the mandatory implementation of the PSRO (Professional Standards Review Organization). This legislation will be the monitoring device and the disciplinary system for self assessment. Throughout this nation, within the next two years the government will designate PSRO regions and a National Advisory Council and establish rules, regulations and guidelines. The government has given us approximately two years of lead-time to either get involved with these programs, participate in them, and run them or it will be done for us. Collectively we can meet this challenge and offer it the leadership it is asking for. Steadfast isolation from the public stream and maintenance of our individualistic self ego will lead us down the road of disastrous defeat. I am not speaking alone for the preservation of the private practice of medicine but more important improving the quality, cost, distribution and character of medicine delivered to each and every American across our country.

Your involvement must stárt with your local district society. Participation in the Foundation movement, wherein reside the framework and imperative fundamentals of the PSRO ammendment, is essential. Support your State Society and above all the AMA, which is your closest link to the legislative body of our central government. The AMA is not the bureaucracy it was when I was in medical school, 25 years ago. It is the largest and collectively the strongest most influential advocate of our profession. It needs your support! To deny it in these critical times is to deny your voice from being heard and your will exercised in the halls of Congress. Again I stress we must *work collectively,* lest we fall apart singularly.

This is the time to appraise ourselves – *self-evaluation.* Of the 335,000 physicians in the U.S., 225,000 are in private practice. If each of us were to see 20 patients in one day across the nation; 450,000 individuals will have been exposed to our professional skill, our equitable fees, our compassion and our sincere efforts. In one week the number swells to 2,250,000 and in one month alone, 10 million Americans would have passed through our offices. What we say, what we do, and the manner in which we conduct ourselves reflects our image in a personal way. What other political power can wield such a force? Not even the President of the U.S. has this personal contact. You are your medical brothers' keeper. When one of us does wrong, it reflects on all of us. We have too long lived in our individualistic secluded kingdom. Is not medicine a calling? Have we forgotten that most of us chose this field of human endeavor from a deep sense of serving mankind? Then why can we not step down a little from our lofty pedestal and relate with our patients who for the most part still admire us and hold us in the highest esteem? Even today, I am reminded of the lines which prompted Robert Louis Stevenson to write: "There are men and classes of men that stand above the common herd: the soldier, the sailor and the shepherd, not infrequently, the artist rarely, rarer still the clergyman; the physician almost as a rule. He is the flower (such as it is) of our civilization and when that stage of man is done with and only remembered to be marvelled at in history, he will be thought to have shared as little as any in the defects of the period and most notably exhibited the virtues of the race."

Setrag A. Zacarian, M.D.

Consultants to the Traveling Public Over 70 Years of Service

CRUISES • TOURS • AIRLINE RESERVATIONS

CARROLL TRAVEL BUREAU, INC.

739-7391

1383 Main St., Springfield (Johnson's Bookstore Building)

HDMS ANNUAL MEETING HIGHLIGHTS

The annual meeting of HDMS was held on April 24, 1973, at Chez Josef's in Agawam, with the call to order being made by President LaMarche at 6:15 P.M. Attendance: 133 including 14 without reservations; 149 made reservations with 30 failing to attend and cancel their reservations.

The minutes of the regularly scheduled meeting of February 6, 1973, were accepted as read.

COMMITTEE REPORTS

President LaMarche called attention to the annual committee reports as published in the April issue of *The Hampden Hippocrat;* these were accepted as published.

Inasmuch as the Executive Committee has been carrying on a very heavy work load, it requested that it be relieved of serving as the Grievance Committee. Thereupon, the Bylaws Committee proposed a change in the Bylaws which would create a new separate Grievance Committee. The said change was published in the March, 1973, issue of *The Hampden Hippocrat,* and the HDMS membership voted to adopt same at this meeting.

OLD BUSINESS

A report on the matter of dinner meetings as opposed to just business meetings without dinner was read by Secretary Stevens. Questionnaires returned in a poll of the membership were small in number and relatively inconclusive. In reply to the questions, 39 voted that there be periodic meetings with no dinner; 60 voted for 3 business meetings without dinner but with dinner at the Annual Meeting; and 59 voted the present policy of dinner with all four meetings. After considerable discussion, it was voted that the Executive Committee be guided by the returns and make appropriate recommendations at a later date.

Dr. James D. Allan then spoke briefly on legislation before the General Court of Mass. and particularly in regard to H6315 as filed by Governor Sargent to reorganize the corporate structure of Mass. Blue Shield, Inc. Inspite of dissatisfactions with past operations of Mass. Blue Shield, Inc., as annunciated and enumerated ad nauseam in the past, Dr. Allan still did not fully endorse the Corporation's activities but did express

Smith Rexall Drug Store Inc.
1132 WESTFIELD ST.
WEST SPRINGFIELD, MASS.
GEORGE M. ATKINS, Reg. Ph.

The defunct defecation reflex

Inhibited too often because of social and business pressures. Artificially stimulated by chronic abuse of harsh laxatives.

Deprived of the natural stimuli of bulk foods, exercise, and adequate fluid intake. The result is loss of muscle tone, constipation, and distension of the rectum.

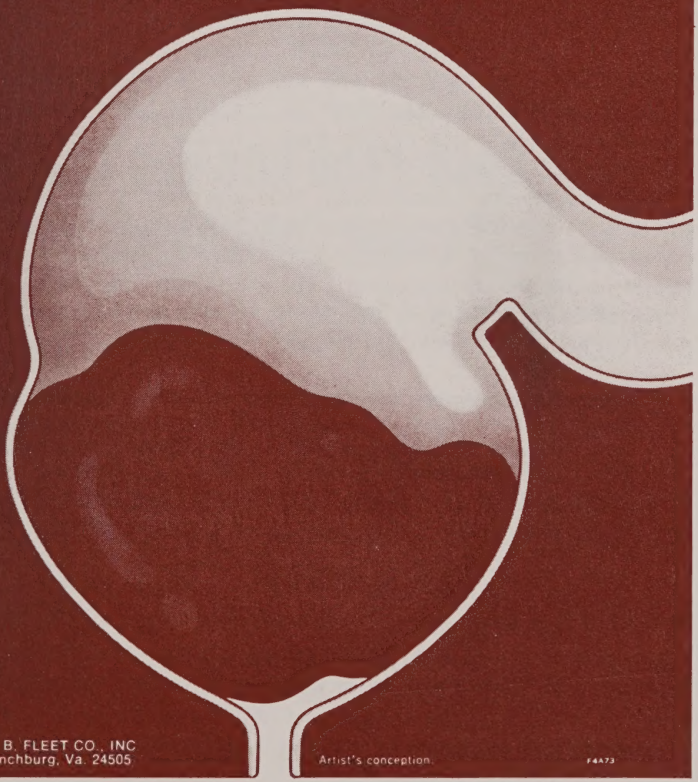
Consider FLEET ENEMA as a helpful adjunct in restoring the normal defecation reflex:

- Provides rapid relief of constipation, usually within 2 to 5 minutes
- Works gently, without the cramping that often occurs with oral laxatives or the burning that may be associated with suppositories
- Cleanses the left colon and rectum without affecting upper portions of the GI tract
- Unique construction regulates flow—prevents leakage and reflux
- Anatomically correct, prelubricated rectal tip helps avoid injury to bowel wall
- Ready to use, easy to use, completely disposable

Contraindications: Do not use when nausea, vomiting, or abdominal pain is present. **Warnings:** Frequent or prolonged use of enemas may result in dependence. Take only when needed or when prescribed by a physician. **Precautions:** Do not administer to children under two years of age unless directed by a physician.

FREE BOOKLET. A supply of the patient booklet, *The Professional Treatment of Constipation*, is available, free of charge, on request to C. B. FLEET CO., INC. P. O. Box 1100, Lynchburg, Va. 24505.

Fleet® Enema
The professional aid to constipation relief



Fleet pharmaceuticals
C. B. FLEET CO., INC
Lynchburg, Va. 24505

Artist's conception. F4473

the feeling that passage of the proposed legislation would virtually take away any and all practicing physician input into the Blue Shield and further subject physicians to the arbitrary policies of Blue Shield under *The Participating Physician's Agreement.* He intimated that the membership should oppose this bill. Dr. John C. Ayres spoke strongly against the bill, outlining the potentialities of a self-perpetuating clique taking over Blue Shield's lay dominated governing body and corporate membership with enslavement of physicians via the instrument of *The Participating Physician's Agreement.* A caveat was issued to the point that, even if the latter mentioned agreement were done away with as a "trade off" to effect the corporate structure change, Blue Shield would still offer a voluntary participating physician's agreement, and an indemnity program to subscribers using nonparticipating physicians. In the latter instance, indemnity payments to subscribers would be less than direct payments to participating physicians. Moreover, "low pay, slow pay and no pay" tactics could impair "cash flow" to nonparticipating physicians so that they would be forced to participate. Hence, Dr. Ayres urged the membership to vigorously oppose the Governor's proposed legislation by contacting their legislators forthwith, and particularly the chairmen of the Committee on Insurance. The present corporate structure,

Our Leaders — L. to R. Dr. Walton E. Stevens, Secretary; Dr; Setrag A. Zacarian, President; Dr. Bernard Bloom, President Elect; and Dr. Paul T. Moore, Treasurer.

imperfect as it may be, still allows for maximum physician input and change from the inside rather than hostile confrontation from the outside.

Dr. Paul T. Moore tendered his report on the state of the Society's finances. Although there were no surplusses to speak of; he did recommend that the dues for 1973-1974 remain at $75 inspite of a slightly higher budget. This was approved by the membership.

There being no further old business the meeting was recessed from 7:15 P.M. to 8:00 P.M. for a social hour and dinner.

NEW BUSINESS

Upon resumption of the meeting, President LaMarche called for a moment of silence and prayer for 9 members of

D-RASH

A FORMULATION THAT PROVIDES ALL NIGHT PROTECTION AS IT PROMOTES HEALING IN THE MANAGEMENT OF

DIAPER RASH

D-RASH is a soothing well balanced product containing Peruvian Balsam, Cod Liver Oil, and Zinc Oxide properly compounded with Beeswax, Talc, Lanolin and Castor Oil in a suitable non-irritating base.

Available At All Drug Outlets

MERIT PHARMACAL CO. — SOMERS, CONNECTICUT

Hot Mits for Hot Potatoes: From outgoing President LaMarche to incoming President Zacarian.

the HDMS who had passed away during the year.

1. Arthur H. Steinhardt, Springfield
2. Paul G. Sanderson, Springfield
3. Herbert R. Toombs, Westfield
4. James Z. Naurison, Springfield
5. Oliver J. Menard, Springfield
6. Thomas S. Sexton, Springfield
7. William J. Kisiel, Springfield
8. Horace P. Russell, Springfield
9. Leo J. Bernier, Holyoke,

Following this, a 50 year membership certificate was presented to Dr. Bernard J. Klein as well as membership certificates to new members admitted during the year.

The report of the Nominating Committee was presented by Dr. David E. Booker. The slate was accepted as presented unanimously except for the position of Legislative Councilor, due to the withdrawal of Dr. James D. Allan. In the latter's stead, Dr. Maurice J. Boivin was nominated from the floor and elected.

Retiring President LaMarche expressed his gratitude to all who assisted him during his tenure of office and thereupon introduced the new President, Dr. Setrag A. Zacarian. After rendering his inaugural address (see page 4), President Zacarian announced his appointments to various committees for the coming year. (See page 11).

There being no further business, the meeting was adjourned at 9:05 P.M.

Ayres

What! You still don't have an "umbrella" policy?

You should. As a doctor you are a member of a profession whose members are highly susceptible to high damage claims and resulting large jury awards.

A low cost "umbrella" policy can add $1,000,000 or more to the limits of your existing policies. It will also give you wider coverage on many personal injury and property damage hazards not covered by your Automobile, Homeowners, Personal Liability and Professional Liability policies.

Every well-to-do person should have this protection. For complete details call one of the specialists. The insurance specialists at FE & B.

FE&B FIELD, EDDY and BULKLEY, Inc. *Insurance*

Donald Hartford, Henry Hanmer, Kenneth Goddard, Robert Hussey, John Seyler

1200 Main Street, Springfield, Massachusetts Telephone 733-3131

OFFICERS OF THE HDMS
1973-1974

President	Setrag A. Zacarian
Vice President & President-Elect	Bernard Bloom
Secretary	Walton E. Stevens
Assistant Secretary	Paul T. Moore

EXECUTIVE COMMITTEE

Ex-officio	
Setrag Zacarian	Robert N. LaMarche
Ex-officio	
Bernard Bloom	Paul T. Moore
Ex-officio	
Walton E. Stevens	Augusto G. Asinas
1974	
John J. Burke	William E. Sheehan
1975	
Sheldon S. Goldberg	William J. Cummings
1976	
Robert A. Kelley	Edward I. Kraus

MMS COUNCILORS

James D. Allan	West Springfield
Malcolm S. Allan	Springfield
Augusto G. Asinas	Holyoke
John C. Ayres	Springfield
Eugene W. Beauchamp, Jr.	Springfield
Maurice J. Boivin	Holyoke
Cardner Cox, II	Holyoke
Louis F. DeRose	Springfield
Elmer F. Franseen	Springfield
John F. Griffin	Springfield
Donald R. Hayes	Longmeadow
Garry DeN. Hough, III	Springfield
Allen S. Johnson	Longmeadow
Joseph R. Kelly	Holyoke
Robert N. LaMarche	Springfield
Frank G. Mills	Westfield
Paul T. Moore	Springfield
Leo S. Newman	Holyoke
Frederick C. Schwendenmann	Wilbraham
Lorne C. Smith	Holyoke
Walton E. Stevens	Springfield
Bruce B. Stoler	West Springfield
Setrag Z. Zacarian	Springfield
John J. Zadworny	Springfield

SUPERVISING CENSOR

Malcolm S. Allan

CENSORS

John J. Burke	1972
John J. Flahive	1972
H. Bernard Tillman	1970
Robert J. Bye	1973

COMMISSIONER OF TRIALS

Alfonso A. Palermo

PUBLIC RELATIONS COUNCILOR

Augusto G. Asinas

LEGISLATIVE COUNCILOR

Maurice J. Boivin

NOMINATING COUNCILOR

Elmer F. Franseen

ALTERNATE TO NOMINATING COUNCILOR

Robert N. LaMarche

REPRESENTATIVE TO STATE COMMITTEE ON TAX SUPPORTED MEDICAL CARE

Bruce B. Stoler

HDMS NOMINATING COMMITTEE

Jean P. Aucoin	1974
Robert A. Kelley	1975
Robert A. Sears	1976

Spring Street Drug, Inc.

121 Spring Street - Springfield, Mass.
736-0351
Good Service Always

Ernest A. Byron, Jr.

SPRINGFIELD

HDMS COMMITTEE CHAIRMEN FOR 1973-1974

The following committee chairmen were appointed by President Setrag Z. Zacarian, M.D., at the Annual Meeting of April 24, 1973.

AUDIT COMMITTEE
Howard N. Simpson

BLUE SHIELD DISTRICT PROFESSIONAL SERVICE
Joseph R. Kelly

BYLAWS
Harry N. Memery

COMMUNITY COUNCIL REPRESENTATIVES
Setrag Z. Zacarian
Bernard Bloom

DISASTER MEDICAL CARE COMMITTEE
Frederick C. Schwendenmann

GREATER SPRINGFIELD CHAMBER OF COMMERCE
Setrag A. Zacarian
Vivian M. Purdy

GRIEVANCE COMMITTEE
John W. Turner

INSURANCE, LABOR RELATIONS & INDUSTRIAL ACCIDENTS
Cyril E. Shea, Jr.

LEGISLATIVE
Maurice J. Boivin

MALPRACTICE & MEDICO-LEGAL AFFAIRS
Eugene G. Boss, Jr.

MEDICO-RELIGIOUS
Theodore E. Hoffman

MEMBERS' INSURANCE
H. Bernard Tillman

MENTAL HEALTH
Stanley D. Rapinchuk

PEER REVIEW
Bruce B. Stoler

PUBLIC HEALTH
James G. Fitzpatrick

PUBLIC RELATIONS
Augusto G. Asinas

SCHOLARSHIP
Bernard Bloom

WOMAN'S AUXILIARY
J. Richard Chabot

a little french restaurant
PICOT'S PLACE
DINNERS, DAILY, 6-10
SUN. 4-9 (closed Mon.)
548 Main St., Hampden, Mass.
Reservations (413) 566-3034

VERNON Surgical SHOP
MAKER OF SURGICAL APPLIANCES
ALSO SURGICAL SUPPLIES.
100 Boston Rd. Spfld., Mass. 01109
Tel. (413) 737-1242

HIGHLIGHTS OF THE APRIL EXECUTIVE COMMITTEE MEETING

The Executive Committee met on Thursday, April 19, 1973 in the Conference Room of the HDMS. Present were Drs. LaMarche, Zacarian, Asinas, Bandeian, Moore, Cummings, Janovsky and Mrs. Purdy. Also present representing the Dental Society were Drs. Gold and McKenna.

A delicious buffet supper was served as the Councilors met for a Pre-council Meeting earlier with some of the officers attending both meetings.

Dr. Ayres, Executive Councilor, gave a lengthy report on Blue Shield. On the completion of this talk, there was much discussion on Blue Shield. Dr. Ayres was thanked for his report and the Executive Committee went into session.

The minutes of the March meeting were read by Dr. Janovsky and approved by the Committee as read.

CORRESPONDENCE

Dr. Butts and Dr. Monroe wrote on Area Health Planning. It was suggested that HDMS write to Dr. Pace and ask for a more convenient time for meetings, with earlier notification since practicing physicians and dentists do have patients to care for in the afternoons.

COMMITTEE REPORTS

Dr. Schwendenmann, Chairman of the Disaster Medical Care Committee, held a meeting with representatives from the Fire Department, Police Department, Civil Defense, American Red Cross and Woman's Auxiliary Disaster Medical Care Committee to discuss emergency care. Radios in each hospital are all tested and installed. Dr. Schwendenmann will write to the hospitals to ask about "back up" doctors if needed in the field for emergencies. Another meeting will be held on May 2, 1973 at 11 A.M. in the Conference Room. Mrs. Nancy Bluestein of the WMPHC, Inc. and Dr. Janes will be invited to attend this with the other representatives.

OLD BUSINESS

Dr. Memery, Chairman of the Bylaws Committee, wrote concerning the suggested bylaw change on Blue Shield. It was felt by the Peer Review Committee that for them to do peer review for Blue Shield was too much at this time. The suggestion was made that the District Professional Service Committee do this as these cases involve physician practices rather than fee problems.

W. F. YOUNG, INC.
MANUFACTURERS OF
Absorbine Jr.
ABSORBINE
ARTHRITIC PAIN LOTION

Compliments of
Thomas P. Sampson, II
and
John Neylon Sampson

Have you incorporated?
Do you plan to incorporate?

Your Society's Officially Approved Accident and Health Insurance Programs offer an excellent way of providing employee fringe benefits.

For some unique ideas on how to obtain the maximum Tax advantage out of your Accident and Health Insurance, please call or write today.

Official Administrators for the
Hampden District Medical Society

LB
personal service
since 1922

LESTER L. BURDICK, INC.
Loyalty Group Insurance

20 CONGRESS ST., BOSTON, MASS. 02109 • (617) 742-2740

Contact:
CRAIG W. STEWART, *District Supervisor*
50 FERNWOOD DRIVE – EAST LONGMEADOW, MASS. 01028
Phone: (413) 525-4806

Mr. Bowens of the Department of Public Welfare replied to the inquiry sent him about a typical physical examination for disability payments. The Committee suggested that Dr. Ayres be asked to print this request and inform the physicians that there is a typical report available from the office for physician disability determination.

The bill concerned with eye enucleation has been passed to be engrossed. All technicians will be trained by the Eye Bank of the Mass. Eye and Ear Informaty.

INTRAV is suggesting a trip through HDMS for the entire state to South America in January, February or March of 1974.

Dr. LaMarche gave a report of the HCFWM, Inc., and the meeting of Foundations held in Falmouth.

Dr. Zacarian discussed the possibility of including interns and residents in the Society with reduced dues. MMS does this, and the physician must have a license to practice in the State. The dues are reduced to $10.00. This was approved with the suggestion that the bylaws be changed to this effect.

NEW BUSINESS

Attention was called by the AMA to a statement made at the House of Delegates, Clinical Meeting, regarding physicians with psychiatric disorders, including alcoholism and drug dependence. Among the recommendations was one urging the creation of special committees by county medical societies to deal with this issue. Such a committee will be formed by HDMS.

Dr. Moore, Treasurer, gave the Annual Report with the dues recommendation to remain at $75.00. Dr. Moore also presented the budget for 1973-74 and the Committee approved both the report and the budget.

It was recommended by the Peer Review Committee that the bylaws be changed to make this committee a standing committee. The Executive Committee voted approval of this suggestion.

Dr. Gold, President of the Valley District Dental Society presented a statement on Fluoridation for approval by the HDMS. The Committee approved this statement unanimously.

The Grievance Committee met and heard one case.

When the supportive care your hospitalized patient is receiving could be equally performed in her own home, consider prescribing HOMEMAKERS home and health care services for the duration of her convalescence or crisis.

Upjohn

HOMEMAKERS®
Home and Health Care Services

HELPING YOU TO HELP YOUR PATIENT.

HOMEMAKERS®
93 Van Deene Avenue
West Springfield, Mass. 01089
Ph. (413) 739-9654
739-9655

McCARTHY-MADAMAS
FUNERAL HOME
625 State Street - Springfield, Mass.
Tel. 739-7381

Highpoint
Motor Inn
Restaurant - Lounge
Dining Room
90 Modern Units
Olympic Pool - Health Clubs
Area's Largest Facilities
For All Types of Functions
Seating 1500
at Exit 5, Mass. Pike & Rt. 33
450 Memorial Dr., Chicopee, Mass.

THE TEENAGE DILEMMA — V.D.

Since the early sixties, venereal disease has had an explosive upward trend. Gonnorrhea and syphilis, which constitute 99 per cent of the total, is estimated to reach over 2.5 million new cases a year. Public health officials now consider this problem in epidemic proportions. The incidence of this tragic disease between the ages of 14-19 constitutes the second most common age group. As physicians we are indeed cognizant and concerned. Parents and educators are alarmed. It has been well documented that four of every five teenager who contracts venereal disease is unaware of the symptons and crippling sequalae which may well follow if neglected.

Your medical society has taken some positive action to help our community and our youth. We have made contact with Mr. Monte Flagg, Supervisor of Health of the Springfield School System. A teachers' work-shop has been set up, wherein full instruction and education in regard to venereal disease will be discussed. We have had the full support of various physicians in our Society to help in the educational program of venereal disease to our teenage population, within our city and hope to involve all school systems of our county.

Doctor Nicholas Fiumara, Director, Division of Communicable Diseases has promised a dark field microscope to the Venereal Disease Clinic at the Springfield Hospital Medical Center, to be available for the entire community by first of July. Incidently, this clinic, under the capable leadership of its Director, Dr. Norman Popkin, serves a large geographic area which extends up to Palmer and Greenfield and half-way between Pittsfield and Springfield to the Connecticut line. This clinic is staffed with a well trained epidemiologist, Miss L.M. Coderre. Venereal diseases in both males and females are diagnosed and treated two days a week.

We have in addition for Springfield Family Planning Program Centers which function under the medical directorship of Dr. Stephen Zwirek. These daily clinic centers are: (1) Wesson Womens Hospital, 732-7113; (2) The Neighborhood Health Center at 451 State Street, Springfield, 732-7113; (3) Brightwood Riverview Health Center, Division Street, Springfield, 787-4458 and (4) Wing Memorial Hospital, Wright Street, Palmer, 283-7651. These centers not only help in family planning, pre and post-natal care but will perform gynecological examinations with epidemiological contact follow-up. Dr. Myra Shayevitz is the Director of the Holyoke Family Planning Program at the Skinner Clinic, 536-5221. The Berkshire Medical Center – Pittsfield General Unit, 443-1619, is under the directorship of Dr. Lionel M. Cole. This clinic will treat venereal diseases in both males and females. The geographic area it serves is the western sector of our State to Vermont and the New York and Connecticut line down to Greenfield.

Physicians in private practice treat approximately 80 per cent of syphilis and gonorrhea that comes to diagnosis but report only one of every eight cases of venereal diseases to the Public Health Departments. Let us be alert to recognize this social disease in our teenage patients. Let us quickly win their confidence and treat them effectively, recognizining the state law of this Commonwealth permits physicians to treat V D cases in minors without obtaining parental consent. Report each case and above all obtain the services of our community epidemiologists to halt the alarming and pandemic rise of venereal disease in our youth.

Zacarian

PHYSICIANS — AN ENDANGERED SPECIES

by
JOHN W. TURNER, M.D.

Abroad in our land is a heightened concern for ecological changes. Generally, these come into critical and climactic focus when the total environmental milieu threatens the survival of a segment of fauna or flora or even all representatives of these categories in a geographic area.

It does not require an Einstein or an Osler to perceive that physicians in the U.S.A. are in new jeopardy. The facts are these:

1. Before July 1, 1966, physicians and hospital administrators were forced to devise schemes for caring for large numbers of patients not covered by any financial support; meaning often charity cases.

2. Since July 1, 1966, the conversion of all patients to paying patients by governmental decree caused immense increases in the cost of medical care. Expressed another way, what previously was charity activity became paid activity. Even retired millionaires, who in many instances never contributed to social security, were inclined to accept this type of generous federal gift.

3. The impact of this decree on the total level of fees generated by physicians was such that the expenditure in this category surpassed the annual cost of tobacco for the first time. According to the best recent figures accumulated by the federal government, the annual expenditure for tobacco in the U.S.A. was 11.2 billion dollars and the physicians' fees, 14 billion dollars.

4. Realism forces one to conclude that if physicians' fees should ever pass the nation's liquor bill of 17.7 billion dollars, there will be a massive shift of the population to faith healers, witch doctors and other methodologies. At that juncture it may be assumed that like the whooping crane, the U.S. physician will disappear from the scene.

All the more reason for the increased and conscientious attention to PSRO, peer review, hospital utilization, and the increased emphasis on ambulatory care. The career you prolong may be your own. Extinction is forever.

MYLANTA
FRANK BOBBIN

54th ANNIVERSARY YEAR
TOROS OMARTIAN & SON, INC.
We Buy and Sell **ORIENTAL RUGS**
390 Bridge Street Tel. 736-1531 Opp. the Kimball Towers

HAFEY FUNERAL SERVICE, Inc.
HAFEY FUNERAL HOME
Springfield, Mass.
EAST LONGMEADOW FUNERAL HOME
East Longmeadow, Mass.

PROPOSED REVISION OF MMS BYLAWS

In the *Circular of Advance Information for Councilors* for the Annual Meeting of the MMS Council, which is to be held on May 23, 1973, the Committee to Revise the Bylaws unveiled a new version of bylaws for the MMS with many changes and a streamlined format to facilitate cross references. Dr. Urban H. Eversole and his committee are to be highly complimented for the development of such a monumental document to make the MMS "more responsive to health care needs in the State and increasing the effectiveness of its voice in matters related to health care". The Committee's time table is to request consideration of the proposed revision by the Council at its February, 1974 meeting and to request adoption by the Society at the 1974 Annual Meeting. The proposed revision is being submitted one year in advance to allow the membership sufficient time to submit criticisms and suggestions; moreover, the Committee requests that such suggestions and criticisms be submitted in writing to the chairman before October 1, 1973.

The proposed revision of the bylaws stems from the actions begun in 1968 as the result of many years of seeming frustrations with the existent bylaws in the light of modern society's evolving philosophy and the MMS's role therein. The Special Committee on Long Range Planning and the Ad Hoc Committee to Review the Bylaws were created in 1968 to effect constructive changes. In its first endeavors the Committee on Long Range Planning recommended that the enabling statutes, as embodied in the original Act of Incorporation in 1781 and as modified slightly since, be modernized with an eye to giving the Society optimum freedom of action in accomplishing its purposes. This was accomplished by legislative ammendments to the Acts of 1781 in 1969. Thereupon, it was recognized that piecemeal changes in the bylaws by amendments would be cumbersome and inadequate; hence, the Committee to Revise the Bylaws replaced the Committee to Review the Bylaws in 1970 to completely overhaul the bylaws. After almost three years of labor, a brain child has been brought forth to the light of day.

CHANGES

A copy of the proposed bylaws in detail can be procured from the Society's headquarters; a summary listing of significant additions to, or deviations from, the present bylaws of the Society in the words of the Committee report follow below:

"1. Three new categories of membership have been added.

Associate: For physicians in training (interns, residents).

Student: For medical students.

Affiliate: For persons other than physicians who are involved in or associated with medicine (scientists, teachers).

Laundry Service for the Home or the Office
"use our line"
DALE BROS
Laundries and Dry Cleaning
472 Union St., Springfield — 736-5491

Luncheons — Dinners — Cocktails
WILLOW GLEN HOUSE
East Longmeadow, Mass.
232 No. Main St. — Tel. 525-2167

2. A mechanism of appeal is provided for applicants who have been denied membership.

3. Greater attention has been given to specialty sections with an opportunity for members to designate the specialty section in which they wish to be listed and provision has been made for specialty section representation in the Council.

4. In addition to specialty section representation in the Council, it is proposed that there be a student representative from each medical school in the state. Provision is also made for the president and secretary of each district medical society to be ex-officio a member of the Council, and for chairmen of standing committees to be Council members during their tenure as chairmen.

5. The Council is the legislative and policy-making body of the Society with essentially the same authority it now has.

6. A Board of Trustees is established to:

a. Be directly responsible for finances.
b. Implement policies established by the Council that are not delegated elsewhere.
c. Be responsible for legislative activities.
d. Be responsible for public relations.
e. Employ an Executive Vice-President and an Executive Secretary.
f. Designate the Secretary-Treasurer of the Society.
g. Appoint the Committee on Finance.

7. The office of Executive Vice-President is established as recommended by the Council.

8. A Judicial Committee is established with appellate jurisdiction in questions of ethics and discipline and with exclusive jurisdiction over institution of impeachment proceedings.

9. The annual meeting of the Society, the Council, the various specialty sections and the scientific program are collectively designated as the *Annual Session* of the Society.

10. A method is provided for submitting questions to all voting members of the Society for a referendum vote.

11. Authority to amend the bylaws is vested in the Council rather than in the Society."

BOARD OF TRUSTEES

The Committee to Revise the Bylaws in its wisdom has come up with a new body in the organizational structure of the MMS with some unique powers, namely, a Board of Trustees. This is quite unerstandable and commendable in the light of the need these days for quick decisions in areas pertaining to legislation, public relations, and finances. Presidents of late have found themselves "flying by the seat of their pants" making decisions and implementing same without counsel and even having serious doubts as to their powers in these areas. Yet, immediate action demands preclude delay in seeking advice and sanction. A body to provide the back-up necessary in situations such as these is mandatory; hence, an instrument must be devised to cope with these crises. Moreover, a small body that can be mobilized in a hurry to react on the surface seems ideal. On the other hand, to vest powers second to none other in the Society could potentially lead to severe conflicts and to a take over by a small vested group for some self-serving motives. The Board of Trustees, as proposed, would consist of eight members elected by the Council plus the President, President-Elect, and

Distinctive Dining at Springfield's
STUDENT PRINCE
and
FORT RESTAURANT
6 Fort St.—788-6628—Springfield

Curran-Jones
FUNERAL HOME
West Springfield - Agawam

Rental and Sales of all patient supplies . . .

GOLD CROSS MEDICAL

HOSPITAL BEDS.
We have hospital beds for every need and pocketbook: standard and multi-hite, mattresses, trapezes, accessories, electric or manual, bedsides. In fact, we can set up a complete hospital room in your patient's home.

WHEEL CHAIRS.
We rent, sell, and service — new or used wheel chairs. And we specialize in rebuilding and repairing all makes. Also a complete line of wheel chair accessories!

★ ★ GOLD CROSS HOME OXYGEN PROGRAM ★ ★

- **All Equipment Included** — Regulator, humidifier, mask or cannula, tubing stand or chain, manifold when needed, and signs.
- **Delivery** — We are on duty 24 hours a day, ready to deliver and install our equipment when you ask for it for your patient.
- **Installation** — Professionally trained technicians install the medically approved equipment.
- **24-Hour Service** — With specially equipped, radio-dispatched trucks.
- **Full Instructions** — Hospital-trained therapists will instruct the patient and family until they are familiar with the equipment.
- **Two-Cylinder Service** — Each home is provided with two full cylinders, and we refill when one is empty.
- **C.I.T. Therapist** — Full-time Certified Inhalation Therapist on our staff.

GOLD CROSS MEDICAL

SERVICES INC. - 78 ISLAND POND ROAD, SPRINGFIELD - 734-5695

the Vice-President. This group would meet at least four times a year and on special call with six members constituting a quorum. This Board would have the following powers and duties:

"GENERAL POWERS AND DUTIES' The Board of Trustees shall be responsible for the management of the property and financial affairs of the Society and for the implementation of all directives of the Council that are not specifically delegated elsewhere.

All recommendations and resolutions of the Council calling for the expenditure of funds, except those previously approved by the Board, shall be referred to the Board of Trustees prior to implementation. If the Board considers such expenditures to be inadvisable, it shall have the authority to delay implementation until the next meeting of the Council at which time it shall report to the Council giving the reasons for this action and making recommendations. A two-thirds vote of the Council is required to override the recommendation of the Board of Trustees.

SPECIFIC POWERS AND DUTIES. The Board of Trustees shall:

(1) Subject to the approval by the Council, employ and determine terms of employment, an Executive Vice-President, who shall be the general administrative officer of the Society, an Executive Secretary and such other administrative officers as from time to time may upon recommendation of the Board be authorized by the Council.

(2) Recommend to the Council at its February meeting (in the manner prescribed in 15.02,) the annual budget for the current fiscal year. It also shall recommend such supplementary budgets as it may from time to time deem appropriate.

(3) Consider requests for supplemental appropriations, and shall refer them, with recommendations, to the Council for approval.

(4) Recommend to the Council the annual dues for each category of membership.

(5) Consider and make recommendations to the Council

what?

You still don't have a regular savings account that earns

DAILY INTEREST
COMPOUNDED DAILY
COMPOUNDED DAILY
COMPOUNDED DAILY
COMPOUNDED DAILY

2-Year Term Certificate
(minimum $1,000)

SIMPLE ANNUAL RATE 6%
COMPOUNDED ANNUAL RATE 6.27%

HAMPDEN SAVINGS BANK
19 Harrison Avenue • Springfield, Mass. 01101

regarding all proposals for special assignments.

(6) Have the accounts of the Society audited at least annually.

(7) Approve investments and reinvestments of the Society's funds by the Treasurer.

(8) Be responsible for the public relations activities of the Society and designate the chairman of the Committee on Public Relations.

(9) Be responsible for activities of the Society in the area of legislation at both the state and national level and designate the chairman of the Committee on Legislation.

(10) Submit an annual report to the Council at its annual meeting, and such other reports as the Council may request. The annual report shall include an audited financial report and reports on the activities of all committees responsible to the board."

As one reviews the powers and the duties, one must admit that same are too important to entrust into the hands of a small group that can be "stacked", and could wield dictatorial control over the Society and its constituents.

AN ALTERNATIVE

The need is there and some assignment of responsibility therefor is needed; but why an existing body with broad "grass root" representation not be delegated this responsibility, namely, the Executive Committee of the Council? This committee may be double in size but it does represent widely dispersed elements of the Society duly elected to represent the views of its local constituents and peers. This body has manifested in the past its ability to react rapidly in times of crises with sage counsel and action. Moreover, it can form various subcommittees with special areas of interest and concern such as those pertaining to finances, legislation, and public relations. It can and should be able to carry out all the duties of the proposed Board of Trustees. There is no need for another body of power in the Society when there already exists a most democratic group capable and undoubtedly desirous of being handed the challenges intended for another power group. Let us not muddy up the waters in the chain of command of the Society's organizational structure. Let us keep it free from any inherently potential denominational power grabs. Let us keep the Society as democratic and representative of all views as possible and yet capable of responding with dispatch and wisdom in any and all situations.

Ayres

KING'S PHARMACY
Ethel K. King, Manager
117 MAIN STREET
CHICOPEE FALLS — 592-1651

Ratell Funeral Home
200 Main Street
Indian Orchard, Mass.

THE INSTRUMENT OF THE IMMORTALS

A Steinway In Your Home

The piano great pianists choose is the best one for your home. Its glowing tone and sensitive response to playing are an inspiration and joy for a lifetime. This is the wisest piano investment, retaining its value over many years.

"112 Years A Steinway Dealer" . . .

M·Steinert & Sons
10 Stearns Sq. — Springfield, Mass.
Tel.: 734-7381

CANCER CARE — A MULTI-MODAL APPROACH

by
SUNIL R. LAHIRI, M.D.

The concept of a multi-modal or a multi-disciplinary approach to a clinical problem is hardly unique. It is well known that every day practice of medicine is intimately related to consultative opinions with various subspecialty groups. This is partly due to the rapid accumulation of highly specialized medical and scientific knowledge, which is far beyond the scope of an individual physician to muster.

The disease cancer is unique so that not only is there a need for a multi-modal approach but the sequence of such modes of therapy is even more important. It is well known that despite all the striving by various fields of medicine and basic science toward the common goal of cancer eradication, very little progress has been made in cancer cure, or even survival of cancer patients, except in very few areas.

At present, none of the major modalities of cancer therapy, i.e., surgery, radiation therapy, chemotherapy and immunotherapy, when applied alone, have shown any significant control of cancer. The failure of an individual modality can be explained by its inability to eradicate all the viable tumor cells present in a patient. All the failures can be attributed to the presence of either microscopic or macroscopic, or perhaps both types of metastases, at the time of the initial therapy. Thus, it becomes evident that in order to achieve a total eradication of tumor cells, a combination of a local and a systemic approach will be necessary.

This hypothesis has now been shown to be true in several types of human neoplasia. Combination of extensive chemotherapy and CNS irradiation has resulted in a marked increase in survival in acute lymphoblastic leukemia in children. Similar combinations of surgery, radiation therapy and Actinomycin D therapy in Wilms' tumor have shown marked improvement in survival of children. A combined approach of splenectomy, radiation therapy and adjuvant chemotherapy has shown significant improvement in survival in Hodgkin's Disease. The recent experience

For Information or Reservations for your Business of Pleasure Trip Contact:

WEIDNER TRAVEL BUREAU, INC.

SEE US AT OUR NEW LOCATION
69 MARKET STREET — GROUND FLOOR

TELEPHONE 781-0550 **SPRINGFIELD, MASS.**

NOW... A NO LOAD MUTUAL FUND FOR THE MEDICAL PROFESSION EXCLUSIVELY

Boston, Mass.: The Beacon No-Load Mutual Fund was created in 1961 by physicians of various New England State Medical Societies to help meet the need for a comprehensive investment program suitable for retirement plans of physicians and other medical personnel. Sales are generally restricted to residents of the New England States. There are No Sales Charges and No Redemption Charges. The initial investment is a minimum of $250. The primary objective of the Fund is to achieve long-term growth of capital. The Board of Directors of the Beacon Mutual Fund recently appointed Douglas T. Johnston & Co., managers of the Johnston Mutual Fund, as investment adviser and managers. You are invited to write for a prospectus. Please address inquiries to Beacon Investing Corp. Box #101, 7 Whittier Place, Boston, Massachusetts 02114

in France with the use of BCG immunotherapy, following intensive chemotherapy of childhood acute lymphoblastic leukemia, lung cancer and breast cancer also supports this hypothesis. The concept has shown such promise that a large cooperative treatment group has been coordinated by the National Cancer Institute where an approach of adjuvant chemotherapy, following simple surgery for breast cancer, will be investigated (National Surgical Adjuvant Study Group).

Successful treatment of a cancer in a patient can only be complete when the emphasis is placed on "total care". The patient must again be considered as a complete entity with all the emotional and psychic needs of the individual and the family taken into consideration. A need for social adjustment, rehabilitation, associated with a compassionate introduction of the patient to the reality about the disease, must be taken into account in the delivery of the total treatment.

Thus, it can be said that the seventies should be considered a landmark in cancer care where a unified concept about the disease has been achieved. Cancer has now been considered as not just one disease, but as a group of diseases with individual variations, even in single-disease categories. Cancer has now been recognized as a systemic disease where the delicate balance between the regulation of cellular function and host immune factor has been disrupted. The use of all currently available modalities of cancer care, i.e., surgery, radiation therapy, chemotherapy, immunotherapy, rehabilitation and psychiatry in proper sequence and combination seems to be the essence of modern cancer care. Therefore, cancer management must involve all the currently available modalities of treatment in the correct sequence and combination, not only from the aspect of the physician's contributions but also from the standpoint of social, economic and emotional needs of the patient to achieve the goal of "total care" of today's patient with cancer.

DISCRIMINATORY TREATMENT

by

STANLEY S. PETERSON, M.D.

(Editor's Note: – The following statements were made by Stanley S. Peterson, M.D., of Springfield, Mo., President of the American Federation of Physicians and Dentists, at a meeting of the officers of the latter named organization with members of the Cost of Living Council in Washington, D.C., on April 26, 1973. There is much food for thought in these statements.)

"We come today to discuss the highly discriminatory treatment of physicians and dentists – and ultimately their patients – under Phase III of the Economic Stabilization program.

"That program is resulting in a price-cost squeeze that makes it difficult for doctors to compete for nurses, technicians and other skilled paramedical employees and to meet the ever-rising costs of qualitative health care.

"The discriminatory application of these controls on prices and wages is unconstitutional under the 14th Amendment and must be explored in court if relief is not forthcoming in reasonable time.

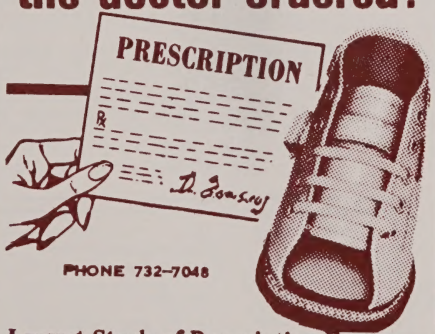
"We submit that with such discrimination will come deterioration of services, and a system which has the potential of providing superior care for all will become a second-class system, if these controls are allowed to stand. Further, the situation to date may be only an indication, we fear, as to what will happen as the Government assumes more responsibility in the health care field.

"Briefly, to explore the background of the situation: Physicians' and dentists' fees constitute a relatively small percentage of the gross national product – less than 1.5 per cent – and constitute a small factor in the consumer price index weighting structure – less than 1.8 per cent. Given the relatively small impact of doctors' services on the nation's economy, the suspension of mandatory price-wage controls would not work counter to the goals of the economic stabilization program. Conversely, continued controls could not be expected to yield meaningful restraints throughout the balance of the economy. The

Traditional
New England Hospitality

YANKEE PEDLAR INN
Miss Bess Stathis, Innkeeper
Rt. 5 at 202 Holyoke, Mass.
Phone: 532-9494

We have just what the doctor ordered!



PHONE 732-7048

Largest Stock of Prescription Footwear in the Area –
Men, Women and Children

ARNOLD'S
Foot Health Shoes

327 BRIDGE ST., SPRINGFIELD, MASS.

potential for harm, on the other hand, is great in terms of the quality of patient care – a point to which we will return in a moment.

"First, though, consider that many policies which have been initiated since August, 1971, in various regulatory agencies have been discriminatory, but this discrimination has been heightened under Phase III. We submit that our opposition to this discrimination is not mere self interest; our attention is drawn to the preservation of a superior medical-dental patient-care system. Capricious imposition of controls, without recognizing their consequences, will surely negate the objectives of the stabilization program.

"In the reports from the consumer price index the following facts are found:

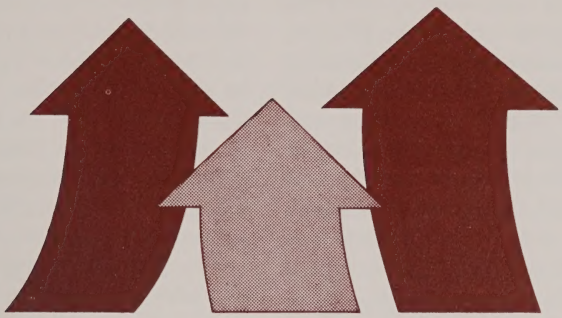
"It is apparent from the physician component of the consumer price index that the medical community has fully complied with efforts to curb inflation during Phases I and II of the new economic policies. In the period from August, 1971, to December, 1972, the "all items" category, as measured by the consumer price index, rose at a rate of 4.2 per cent, and the "all services" component rose at a rate of 4.6 per cent – while physicians' and dentists' fees rose only 3.2 per cent. In the period from November, 1971, to December, 1972, the 14 months of Phase II, the "all items" category rose 3.8 per cent while physicians' and dentists' fees increased only 2.1 per cent. This percentage is below the 2.5 per cent annual goal set by the Health Services Industry Committee of the Price Commission.

"As the goal of the economic stabilization program was to halve the rate of inflation, the record achieved by physicians and dentists surpassed considerably the expectations of the program. Thus, there is no indication that physicians' fees have been a major inflationary factor during the course of the stabilization program, and it is difficult to discern any rationale for imposing these discriminatory controls in this sector. Continued controls do not appear to be the just reward for this record of compliance.

"While doctors have held the line in the letter and spirit of the law, as defined by the Cost of Living Council, all of our expenses continue to rise. The cost of equipment is up. The cost of supplies is up. The cost of office space is up. Far

ESTABLISHED IN THE YEAR 1891
Dickinson-Streeter Funeral Service
305 STATE ST., SPRINGFIELD, MASS.
RICHARD C. STREETER G. WALLACE STREETER
EARLE C. BRADLEY ALFRED J. GAY

Landen-True
SPRINGFIELD JEWELERS FOR OVER A CENTURY
1365 MAIN STREET BRIGHAM BUILDING



CONFLUENCE '73

First in a new series of medical forums — sponsored by AMA.

Confluence '73: successor to AMA's popular annual convention.

Confluence '73: a whole new approach to the interchange of medical knowledge, an intermixing of your education and experience with that of leading medical researchers and experts covering a broad variety of meaningful and rewarding subjects.

Confluence '73: spotlight on 18 challenging postgraduate courses — 11 of them never offered before by AMA. Spotlight on stimulating Joint Scientific Sessions offering a rare opportunity for physicians in different specialties to meet and exchange ideas on highly topical subjects — like "The Battered Child" and "Revascularization of the Ischemic Myocardium." Spotlight on special demonstration exhibits including urology and cardiopulmonary resuscitation.

Confluence '73: New York. June 23-27.

Advance Registration

Please return to:
Circulation and Records Department
American Medical Association
535 North Dearborn Street
Chicago, Illinois 60610

Please print

Name _____
(each physician must register in his own name)

Office Address _____

City/State/Zip _____

I am a member of the AMA through the _____ State Medical Association or in the following government service: _____

This form must be returned before May 23, 1973. Your Advance Registration Card and tickets will be sent to you on June 7, unless you request an earlier mailing date.

General Registration
- ☐ AMA members and their guests: no fee
- ☐ Non-member physicians: $25
- ☐ Non-member medical students: $10
- ☐ Guests of non-members: $5

☐ **Reservations for Scientific Awards Dinner**
Tuesday, June 26/Reception: 6:30 p.m./Dinner: 7:30 p.m.
Tickets: $15 each, payable in advance

My remittance of $_____ is enclosed.
(Make check payable to American Medical Association.)

Check must accompany registration.

In accordance with the AMA Bylaws, I hold active membership in the AMA, and I wish to vote in the Scientific Section I have checked:

01 ☐ Allergy
02 ☐ Anesthesiology
26 ☐ Cardiovascular Diseases
05 ☐ Clinical Pharmacology and Therapeutics
20 ☐ Colon and Rectal Surgery
03 ☐ Dermatology
04 ☐ Diseases of the Chest
07 ☐ Family and General Practice
11 ☐ Federal and Military Medicine
06 ☐ Gastroenterology
08 ☐ General Surgery
09 ☐ Internal Medicine
25 ☐ Neurological Surgery
24 ☐ Neurology
13 ☐ Obstetrics and Gynecology
14 ☐ Ophthalmology
15 ☐ Orthopedic Surgery
10 ☐ Otorhinolaryngology
16 ☐ Pathology
17 ☐ Pediatrics
18 ☐ Physical Medicine and Rehabilitation
27 ☐ Plastic and Reconstructive Surgery
19 ☐ Preventive Medicine
12 ☐ Psychiatry
21 ☐ Radiology
22 ☐ Urology

C

more harmful – and a direct threat to the quality of health care services – is the increasingly difficult competitive position of the doctor in keeping and recruiting good, experienced, qualified nurses, laboratory and X-ray technicians and other skilled paramedical help. Despite Phases I, II, and III, both Federal and state payroll taxes have gone up sharply, leaving less money in the medical assistant's pay check. Inflation continues to erode the purchasing power of the lesser amount. Dedication goes only so far; As the economic pinch grows tighter, the nation's most skilled medical assistants are giving greater consideration to employment opportunities in uncontrolled segments of private industry. X-ray technicians, for example, are in increasingly short supply because of the freedom of industrial labs to pay them competitive wages without Federal restraints. The 5.5 per cent wage-control ceiling imposed on the health-care system is not always sufficient to meet the competition from industry and commerce. Even when it is, there remains a severe question as to the doctor-employer's ability to meet the increased payroll costs without appropriate revisions in the fees charged for health services. Individual physicians and dentists cannot indefinitely continue to absorb higher costs out of their own pockets. As we have seen from our discussion of doctors' relatively minor impact on the economy, there is indeed no good reason why they should be expected to do so.

"In theory, doctors' fees may rise by 2.5 per cent annually. But let's look at that theory a moment. The increase is contingent on stabilization of profit margins – i.e., net practice income divided by gross income. In a bad year, a doctor may be forced to raise fees. In the year that then follows, efforts to economize and to boost office productivity may succeed – and by themselves result in a profit-margin increase exceeding 2.5 per cent, without regard to the small fee increase. How then can the doctor defend the improvement? How is he to prove that the rise was essentially productivity-based rather than an inflationary price movement? The probability is that he cannot – and thus will pay tax penalties at the least and face

CENTRAL TRAVEL BUREAU

222 Worthington St. Springfield

781-1680

CERTIFIED TRAVEL COUNSELOR

Hollywood Uniform Centers

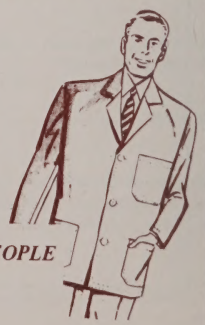
WHITE SWAN UNIFORMS

YOUR WHITE SWAN UNIFORM SHOPS IN SPRINGFIELD

PROFESSIONAL UNIFORMS FOR PROFESSIONAL PEOPLE

114 (Lower) STATE ST. – 734-4364

248 BRIDGE ST. (UNIFORM SHOPPE) – 737-8543



the possibility of a fine as well. The effect of the situation is that fee increases of 2.5 per cent are *not permitted.* In practical application of the law, a doctor dare not raise fees at all. He has no sure way of predicting which way the financial winds may blow in the year to follow, and he surely holds no desire to discourage greater productivity in his office. But, while the 2.5 per cent fee increase is a myth, increasing costs are not. They occur almost daily, as any housewife who shops for food can attest.

"Congress, in establishing statutory authority, presumed the existence of an economic emergency and authorized a comprehensive governmental response. It recognized the need for prompt actions by the executive branch. However, the Congress directed the President to conduct such programs in an equitable manner. These acts must comply with the criteria of Section 203 (b) which says that standards shall be 'generally fair and equitable' and must call for 'generally comparable sacrifices by business and labor as well as other segments of the economy.'

"We submit that this highly discriminatory regulation is punitive rather than fair and equitable, and further that it has been used, either consciously or unconsciously, to further the aims of cost control in the health care industry for the convenience of the Federal health care program."

STORROWTON TAVERN

On the Village Green
Eastern States Exposition Park
West Springfield, Massachusetts
Bill Kavanagh, Innkeeper

An original colonial inn serving the finest early American food and drink plus continental specialties * An incomparable setting for weddings, banquets and parties * Open year round. Phone: 732-4188

MALL DRUGS

4 Convenient Locations

1511 MAIN ST., SPRINGFIELD
785-1528

EASTFIELD MALL, SPRINGFIELD
543-3963

ALLEN AND COOLEY STREETS
Grant Plaza, Springfield
783-0531

ROUTE 5, GRANT PLAZA, HOLYOKE
534-3364

Save Taxes . . .

with a

FIRST FEDERAL RETIREMENT SAVINGS PLAN
For the Self-Employed

NO FEES — DEDUCT UP TO $2,500. BEFORE TAXES

Benefits available at age 59½

FIRST FEDERAL SAVINGS

1243 MAIN ST. 560 SUMNER AVE.
Springfield, Massachusetts

LIST OF ADVERTISERS

Below is a list of our advertisers for 1973. In your contacts please tell these people how much we appreciate their support.

Arnold's Shoes
Beacon Investment
Betty's Old Towne House
Lester L. Burdick, Inc.
Byron's Funeral Home, Inc.
Carroll Travel Bureau
Central Travel Bureau
Chester's Drug Store
Corliss Adjustment Bureau, Inc.
Cristy Associates
Curran-Jones, Inc., Funeral Home
Dale Bros. Laundry
Dickinson-Streeter Co., Funeral Home
Dunlop Florist
East Longmeadow Nursing Home, Inc.
Field, Eddy & Bulkley
First Bank
First Federal Savings & Loan Assoc.
C. B. Fleet Co., Inc.
Forest Park Ambulance
Gold Cross Medical Service
Hafey's Funeral Service
Hampden Savings Bank
Harrell's Funeral Home
Harris Pharmacy
Henderson Funeral Home
Highpoint Motor Inn
Hollywood Uniform Center
Homemakers
Hornblower & Weeks
King's Drug Store
Landen-True, Jewelers
Lilly, Eli and Co.
Log Cabin Restaurant
Mall Drugs
McCarthy-Madamas Funeral Home
Medical Equipment Unlimited
Merit Pharmacal Co.
Norman's Pharmacy
O'Donnell, Edward F. Funeral Home, Inc.
Old Storrowton Tavern
Omartian, Toros & Son, Inc.
Picot's Place
Prop-R Walk Shoes
Ratell Funeral Home
Reliable Telephone Service
Sampson, T. P. Co.
Schine Inn
Smith Rexall Drug Store, Inc.
Spring St. Drug
M. Steinert & Sons
Stuart Pharmaceuticals
Student Prince Restaurant
Valley Bank
Vernon Surgical Shop
Weidner Travel Bureau, Inc.
Whyte Co. Inc. Realtors
Willow Glen House
W. F. Young, Inc.
Yankee Pedlar

Edward F. O'Donnell
FUNERAL HOME
Springfield

Dine in
Relaxed Elegance

Always a different and delicious menu to enjoy in pleasant comfort. Serving daily from eleven-thirty AM to midnight.

THE LOG CABIN
Easthampton Road, Route 141
HOLYOKE
536-7700

℞ Prescription Footwear
Is Our Business!

Put Your Patients In Our Shoes
Men — Women — Children

— WE CARRY —

1. Straight Last Surgical Boots
2. Abductor Shoes
3. Adductor Shoes
4. Denis Browne Splints
5. Thomas Heels
6. Depth Inlay Shoes
7. Torqheels

PROP-R WALK SHOES
ENFIELD VILLAGE
Rt. 190 - Hazard Ave. - Enfield, Conn.
Open Daily 9:30 - 5:30 P.M.
Friday Night 'till 9:00 P.M.
Brian Silvia, prop. (203) 745-9998

EAST LONGMEADOW NURSING HOME

Ultra modern, resortlike, convalescent and nursing home overlooking Franconia Golf Course.

Fine staff of registered nurses, 24 hours on duty.

Most generous amounts of interior and exterior space for that "great to be alive feeling," winter or summer.

For people who think first

People who *think first* before banking, want a bank that thinks of them first. And that is our commitment to anyone who banks with us. We have pledged ourselves to deliver to our customers the ultimate in modern banking services . . . everything from checking accounts to checking on overseas investments.

FIRST BANK

For people who think first

RELIABLE TELEPHONE SERVICE

Serving SPRINGFIELD, CHICOPEE, and WESTFIELD areas since 1947 with Pleasant, Efficient and Dignified ANSWERING SERVICE.

1096 STATE STREET

SPRINGFIELD, MASS. 01109 739-5211

FOREST PARK AMBULANCE SERVICE

AMBULANCE ASSOCIATION OF AMERICA

MEDICARE SERVICE AVAILABLE

1186 STATE STREET
SPRINGFIELD, MASS.

739-7373

ANYWHERE - ANYTIME 24 HOURS

DOCTOR!

OUR COLLECTION SERVICE IS THE *RIGHT* PRESCRIPTION FOR YOUR DELINQUENT ACCOUNTS

we have served "The Business Side of Medicine" for over a quarter of a century

CORLISS ADJUSTMENT BUREAU, Inc.

293 Bridge Street Springfield, Mass. 01103

call our Medical Division, 739-7346